

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 116
Registered No. 500

PLACE OF BIRTH

County Stila State Arizona
District or Township _____ or Village _____
City Miami No. 900 Pine Oak St. St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Francisco Sanchez { If child is not yet named, make supplemental report, as directed.

3. Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other 0 6. Legitimate? yes 7. Date of birth Oct. 4 - 1929
Month Day Year

8. FATHER Full name Refugio Sanchez
9. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state. Arizona

10. Color or race Mex. 11. Age at last birthday 29 (Years)

12. Birthplace (city or place) Durango, Mex.
(State or country)

13. Occupation Nature of Industry Carpenter

14. MOTHER Full maiden name Apolonia Aguirre
15. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state. Arizona
16. Color or race Mex. 17. Age at last birthday 24 (Years)

18. Birthplace (city or place) Durango, Mex.
(State or country)

19. Occupation Nature of Industry Housewife

20. Number of children of this mother 2 (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 2
(b) Born alive but now dead 0
(c) Stillborn 0

21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
I hereby certify that I attended the birth of this child, who was born alive at 9:30 p. m. on the date above stated.
(Born alive or stillborn.)

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Given name added from a supplemental report _____ Address Miami, Arizona
Month, day, year _____

Registrar _____ Filed Nov 12, 1929 Registrar L. E. Dwyer

629-1004-115